

Skin Grafts

Your Operation Explained

ENT Department

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This leaflet has been written to help you understand the skin graft surgery you are about to have. We hope it will answer some of the questions that you or those who care for you may have at this time. It does not replace the discussion between you and your surgeon but helps you to understand more about what has been discussed.

What Is A Skin Graft?

A skin graft is the procedure to remove an area of skin from one part of the body (donor site) and use it to cover a wound in another part of the body (graft site).

When Is A Skin Graft Performed?

A skin graft is usually performed immediately after surgical excision of a skin cancer.

What Are The Benefits Of A Skin Graft?

A skin graft can be used to mend a wound when it is not possible to stitch the wound together, either because the wound is too big or there is not enough extra skin to allow this.

Special Instructions

Any Condition Specific Danger Signals To Look Out For:

Contact Information If You Are Worried About Your Condition

Your own GP

Other Useful Telephone Numbers /Contacts:

NHS 111

Stop Smoking Helpline (Sefton) – 0300 100 1000

Stop Smoking Helpline (West Lancashire) – 0800 328 6297

Long Term Care Of The Skin Graft

The skin graft will be prone to dryness. Apply a moisturising cream regularly, 2-4 times daily. Protect the area from sunburn with clothing, a hat and a high factor sun cream (SPF 30 or higher).

Additional sources of information can be found online at:

www.entuk.org

www.nhs.uk

What Types Of Skin Grafts Are There?

Split thickness skin graft

This involves shaving a thin sheet of skin that is 0.2-0.4 mm thick from the thigh, buttock or upper arm. A graze like area is left behind which will heal over 2 to 4 weeks.

A split thickness skin graft contains the epidermis and part of the dermis. This type of skin graft is more suitable for covering large wounds.

Full thickness skin graft

A full thickness skin graft is thicker and contains the epidermis and the full dermis. A small piece of skin is cut out from the donor site and the skin edges are stitched together to leave a straight-line scar.

A full thickness graft is usually 2-4mm thick and can only be used for smaller wounds on the head, neck and hands. Skin may be taken from the neck, the area behind the ears, the inner side of the upper arm and the abdomen.

This leaflet will inform you of the full thickness skin graft, as this will be used for your surgery.

Preparing For Surgery

- Smoking slows down the rate of wound healing and increases the risk of infection. If you can, stop smoking at least a week before your surgery.
- If you are diabetic, check with your GP that your diabetes is well controlled.
- If you are taking blood thinning (anticoagulant) medications such as aspirin, warfarin or clopidogrel, you must tell your surgeon as soon as possible.
- It is advisable to have a shower or bath before your operation. As your operation is on your head, please wash your hair the night before or day of surgery.

Arriving At The Hospital

- Your operation is performed as a day case under local anaesthetic, so you will be awake and alert throughout.
- There is no need to stop eating and drinking.
- You must have a responsible adult to take you home and stay with you overnight.

Consent

Written consent will be taken when your name is placed on the waiting list for the operation. Alternatively, it can be taken at the pre-operative screening clinic or on the day of surgery by the ENT surgeon.

What Will The Doner And Graft Site Look Like?

Donor site

You will be able to see where the wound has been stitched. This should normally heal with a thin, flat scar. Some people may experience a widened or lumpy scar.

Graft site

The graft often looks red or purple when the dressings are first removed. This can sometimes cause concern but it is completely normal. The colour will fade gradually over 3 to 12 months.

A skin graft takes 12 to 24 months to reach its final cosmetic result, and excellent results are frequently obtained. However, the colour of the skin graft will never be exactly the same and it is usually lighter (and sometimes darker) than the surrounding skin.

The skin graft will also not feel as smooth as the surrounding skin either and will benefit from applying a moisturiser regularly. There is often an obvious indentation (dip) at the graft site. With time this dip may become less obvious, but it will not always disappear.

What Are The Risks Of A Skin Graft?

Graft failure

Sometimes a graft does not take. The most common reasons for this are bleeding or oozing of tissue fluid under a graft, which separates the graft from the tissue beneath it. Infection and shearing movements also prevent the graft from connecting to the tissue beneath. It may be necessary to repeat the procedure if a graft has failed, although sometimes it is possible to allow the body to heal a failed graft if only part of the graft has failed.

Infection

Infection may cause increasing pain, redness and swelling around the skin graft or donor area, a smelly discharge on the dressing or fever. If any of these signs occur then please contact us without delay.

Bleeding

It is normal to experience minor oozing in the first 24 hours. If your wound bleeds do not dab it, but press it gently but firmly without stopping for 30 minutes with a clean tissue, towel or dressing. Ensure that you are sitting upright and avoid bending forwards. If bleeding does not stop, repeat the process for another 30 minutes then contact the hospital.

How Is The Skin Graft Held In Place?

It is important that a skin graft is held in place and does not move around as it must connect with the blood supply from its new area; this usually takes at least 7 days. Skin grafts may be held in place by a variety of means including stitches, medical grade glues and dressing. If stitches have been used, these are normally removed after 7 days.

What Kinds Of Dressings Are Used?

Donor site dressings

The site will be closed with dissolvable stitches and normally there will be no need for a covering dressing.

Graft site dressings

A firm dressing, which will be stitched into position, is used to help keep the graft in place. This is known as a "bolster" dressing. It is very important that the skin graft is protected from excessive movement which may shear the graft off and cause it to fail.

Graft site dressings are normally removed 7 days following surgery at the hospital.

Appointments for dressing changes and stitch removal will be arranged for you before you leave hospital.

After The Surgery

Following the procedure you are usually able to go home after a period of observation. On arrival at home the following points are very important.

Rest

You will need to take things gently for the first 2 weeks to allow the graft to heal properly. The graft is quite fragile, so it is important not to rub or knock the graft or dressing.

Posture

Since the graft is on your head, avoid bending and stooping forward for 5 days as this may make the wound bleed.

When in bed, avoid lying on the wound area. Also avoid lying completely flat. You may experience bruising and swellings around the area, particularly if the wound is near the eye. This usually settles within the first week, though it may be quite alarming at first.

Bathing

Keep the dressings dry for at least a week.

Pain

The local anaesthetic will wear off in 1-2 hours. You may take regular paracetamol if there is any pain or discomfort (follow the instructions on the packet for the dose).

Numbness

Initially the graft site will have no sensation. Sensation will often return in the first 2-6 months. Sometimes there is a period when the graft is over sensitive especially with changes in temperature e.g. after a hot shower.

Swelling and bruising

Swelling and bruising are very common, particularly when surgery is performed around the eyes or on the forehead. This usually subsides within 4-5 days after surgery.

Work

You can usually begin gentle work within 2-6 weeks depending on the type of surgery you have had. Please ask your doctor for advice on this.

Mood

It is not uncommon to feel a bit 'down' after any operation, so do ask your doctor or nurse if you feel you need more psychological support.